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COMMISSION ON ETHICS

## JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING DECEMBER 31, 20\_08

## GENERAL INFORMATION

			***************************************				
1.	Name Darryl	Ben Doder	nbier				
2.	The clustices	of the Peace	, Bunkerv	Ille Townsh			
3.	Name Darryll Ben Dodenbier Tisse clustice of the Peace, Bunkervilles Townsh Malling address P.D. Box 7636						
	Bunker	Yille Nevad	1a 8900	7			
4.		rada 43 year					
5.	County in which you are registered to vote Clark						
6.	Longth of residence in the county in which you are registered to vote 21 yrs						
		ATION FOR EXTRA-J					
7. Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. See Canon 41(2)(a)(ii). Attach additional sheets if necessary.							
	Dale	Nature and Place of Activity	Name of Payor	Amount			
		NONE					
				M————————			
	hap-p						
		INCOME					
В.	Disclose each source of income received by you and by each member of your household who is 18 years of oge or older. No listing of individual clients, customers, or patients is required. Income received from such sources should be disclosed under a general heading such as "professional services." See Canon 41(2)(a)(iii). Attach additional sheets if necessary.  Source of Income  Recipions						
	Heritage Ele	ctric	Darryll Do	denbict			
	DED Partner	S	Darnil Dog	lenbier			
	_Janets Port	raut Co	danet Dode	abter			
				acci ca			

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## REAL PROPERTY

9. Disclose the specific location, nature, and particular use of any real estate which has a fair market value of \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or beneficial interest, and is located in Nevada or any adjacent state. See Canon 41(2)(a)(iv). Specific addresses are required – list the street address or legal description. You must designate whether the property is unimproved vacant land, agricultural land, commercial building, apartments, single-family, rental, etc. Attach additional sheets if necessary.

additional shocis if necessary.  Specific Location	Nathre/Particula: Uso	fotorest Holder
		<i>5</i> 0%_
660 Hardy Way, N		
# 700 Hardy Way, M		50%
275 W. Fretso, Bu	inkanula, NU Threet	ment 100%
·		
		•
	CREDITORS	
	CREDITORS	
	one for which a socurity interest in a mo r designee, See Canon 41(2)(a)(v). Attac	
HONE		
	BUSINESS ENTITIES	
List each business entity in which you	or a member of your household is involved	
List each business entity in which you ignored director, officer, owner (in whole security representing one percent or n	or a member of your household is involve or in part), limited or general partner, onere of the total outstanding stock or se	holder of any class of stock or
List each business entity in which you trust, director, officer, owner (in whole	or a member of your household is involve or in part), limited or general partner, onere of the total outstanding stock or se	holder of any class of stock or
List each business entity in which you trust, director, officer, owner (in whole scourity representing one percent or nentity, See Canon 41(2)(a)(vi). Attach Business Entity	or a member of your household is involve or in part), limited or general partner, o nore of the total outstanding stock or se additional sheets if necessary.  Nature of involvement	r holder of any class of stock or curities issued by the business  Person Involved
List each business entity in which you houst, director, officer, owner (in whole security representing one percent or nentity, See Canon 41(2)(a)(vi). Anach	or a member of your household is involve or in part), limited or general partner, o nore of the total outstanding stock or se additional sheets if necessary.	rholder of any class of stock or curities issued by the business

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## GIFTS, BEQUESTS, FAVORS, OR LOANS

12.	Disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or loan to you or a member of your family residing in your household it its value exceeded \$200, unless this disclosure is no required by Section 4D of the Code of Indicial Conduct. See especially Canon 4D(5)(h) and 41(2)(a)(vii) Attach additional sheets if necessary.					
	Dulk	Name and Place of GIST	Name of Donur	rlarount		
		NONE		_		

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND COMPLETE.

5/7/09 Dale Tampe Dofant.

File this form with the State Court Administrator.

Doliver or mail to:

State Court Administrator Administrative Office of the Courts 201 S. Carson Street, Sulto 250 Carson City, Nevada 89701-4702

Telephone: (775) 684-1700